SCHEDULE C-EZ (Form 1040)

Net Profit From Business

(Sole Proprietorship)

OMB No. 1545-0074

Attachment Sequence No. **09A**

Department of the Treasury Internal Revenue Service (99)

Name of proprietor

▶ Partnerships, joint ventures, etc., must file Form 1065 or 1065-B.

► Attach to Form 1040 or 1041. ► See instructions on back.

Social security number (SSN)

Par	t I General II	nformation						
Sche Inste Sche	 Had business expenses of \$2,500 or less. Use the cash method of accounting. Did not have an inventory at any time during the year. Did not have a net loss from your business. Had only one business as a sole proprietor. 		And You:	 Had no employees during the year. Are not required to file Form 4562, Depreciation and Amortization, for this business. See the instructions for Schedule C, line 13, on page C-4 to find out if you must file. Do not deduct expenses for business use of your home. Do not have prior year unallowed passive activity losses from this business. 				
Α	A Principal business or profession, including product or service B Enter code from pages C-7, 8,							
С	Business name. If no separate business name, leave blank.				D	Employer	ID number	(EIN), if any
E	Business address (in	ncluding suite or room no.). Address not require	ed if same as on Form	1040, page 1.		!		
	City, town or post office, state, and ZIP code							
Par	t II Figure Yo	ur Net Profit						
1	Gross receipts. Caution. If this income was reported to you on Form W-2 and the "Statutory employee" box on that form was checked, see Statutory Employees in the instructions for Schedule C, line 1, on page C-3 and check here							
2	Total expenses (s	see instructions). If more than \$2,500, you	must use Schedule	C		2		
3	Form 1040, line 1	act line 2 from line 1. If less than zero, you 2, and also on Schedule SE, line 2. (Statule SE, line 2. Estates and trusts, enter or	utory employees do	not report th	nis	3		
Par	t III Information	on on Your Vehicle. Complete this par	t only if you are c	aiming car c	or tr	uck exp	enses or	n line 2.
4	When did you place your vehicle in service for business purposes? (month, day, year) ▶							
	Business b Commuting c Other							
							_	
6		pouse) have another vehicle available for p					⊔ Yes	∐ No
7	Was your vehicle a	available for personal use during off-duty	hours?		•		☐ Yes	☐ No
8a	Do you have evide	ence to support your deduction?					☐ Yes	☐ No
b	If "Yes." is the evid	dence written?					□ Ves	□No

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